

Docket No.: NIH099.001C1

December 2, 2005

Page 1 of 2

RCE  
1647  
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Please Direct All Correspondence to Customer Number **45311**

**REQUEST FOR CONTINUED EXAMINATION**

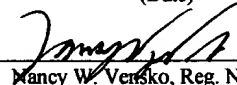
Applicant : Luyten et al.  
App. No : 09/574,819  
Filed : May 19, 2000  
For : CARTILAGE-DERIVED  
MORPHOGENETIC PROTEINS  
Examiner : Romeo, David S.  
Art Unit : 1647

**CERTIFICATE OF MAILING**

I hereby certify that this correspondence and all marked attachments are being deposited with the United States Postal Service as first-class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on

December 2, 2005

(Date)

  
Nancy W. Versko, Reg. No. 36,298

**Mail Stop RCE**  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

This Request for Continued Examination (RCE) is being made as follows:

1. Submission Required under 37 CFR 1.114:

(X) Enclosed:

- (X) Amendment/Reply in 6 pages.
- (X) Supplemental Declaration of Prior Invention in the United States to Overcome Cited Publication Under 37 C.F.R. § 1.131 in 6 pages.
- (X) Exhibit A in 6 pages in color.
- (X) Exhibit B in 2 pages in color.
- (X) Exhibit C in 2 pages in color.
- (X) Return Postcard.

12/08/2005 DEMMANU1 00000024 09574819

01 FC:1801

790.00 DP

12/08/2005 DEMMANU1 00000024 09574819

02 FC:1253

1020.00 DP

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2. Fees:

| FEE CALCULATION      |            |                |                      |               |
|----------------------|------------|----------------|----------------------|---------------|
| FEE TYPE             |            | FEE CODE       | CALCULATION          | TOTAL         |
| RCE Fee              |            | 1801 (\$790)   |                      | \$790         |
| Suspension of Action |            | 1463 (\$130)   |                      | \$0           |
| Total Claims         | 6 - 20 = 0 | 1202 (\$50)    | 0 x 50 =             | \$0           |
| Independent Claims   | 1 - 6 = 0  | 1201 (\$200)   | 0 x 200 =            | \$0           |
| 3 Month Extension    |            | 1253 (\$1,020) |                      | \$1020        |
|                      |            |                | <b>TOTAL FEE DUE</b> | <b>\$1810</b> |

(X) An extension of time is hereby requested by payment of the appropriate fee indicated above.

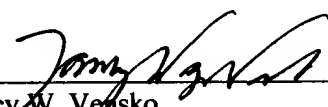
3. Payment:

(X) Check in the amount of \$1810 to cover the above fees.

Please charge any additional fees, including any fees for additional extension of time, or credit overpayment to Deposit Account No. 11-1410.

Respectfully submitted,  
KNOBBE MARTENS OLSON & BEAR LLP

Dated: December 2, 2005

  
Nancy W. Vensko  
Registration No. 36,298  
Attorney of Record  
Customer No. 45,311  
(805) 547-5580